

COUNTY OF FAIRFAX
DEPARTMENT OF TAX ADMINISTRATION
12000 GOVERNMENT CENTER PARKWAY, SUITE 223
FAIRFAX, VIRGINIA 22035-0029
Phone: (703) 222-8234 Fax: (703) 324-3500 or 324-3505

TRANSIENT OCCUPANCY TAX FOR THE QUARTER ENDING _____
County Ordinance (4-13)

Owner Name _____

Trade Name _____

Virginia Sales Tax Registration Number _____

Business Address _____

Mailing Address _____

1. GROSS RENTALS

- a. Conference/Public Room Rentals
- b. Private Room Rental
- c. Gross Rentals (add lines a and b)

1a	
1b	
1c	

2. ALLOWABLE DEDUCTIONS

- a. Exempt Rentals (over 90 days)
- b. Refunds of Rentals Included in gross rentals above
- c. Refunds on Rentals from Previous Report(s).
- d. Total Deductions (add lines 2a through 2c)

2a	
2b	
2c	
2d	

3. NET RENTALS (subtract line 2d from line 1c)

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4. TAX (2% of line 3)

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5. PENALTY

- a. Compute penalty (5% of line 4) if this report is postmarked later than 30 days following the end of the quarter.
- b. Tax plus penalty (add lines 4 and 5a)

5a	
5b	

6. INTEREST

Compute interest (.42% of line 5b) for each month or portion thereof that the report is late.

INTEREST COMPUTATION			
1-30 DAYS LATE	LINE 5B TIMES .42		
31-60 DAYS LATE	LINE 5B TIMES .84		
61-90 DAYS LATE	LINE 5B TIMES 1.26		

6	
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7. TOTAL TAX DUE (add lines 5b and 6)

7	
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Make check payable to "County of Fairfax" and remit along with white and yellow copies of this report to the Department of Tax Administration. Please retain pink copy for your records.

I hereby certify this return has been examined by me and is, to the best of my knowledge, a true, correct and complete return.

Name and Title _____ Signature _____ Date _____ E-mail _____ Telephone Number _____

For Office use Only

To: Director, Dept. of Tax Administration

Date Received _____

Re: Account Number _____

For Deposit _____

Received By _____